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(Depositor's name)	BARBARA STEIN
(Signature)	Garbara Ster
(Date)	March 15,2005
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LLP

ı	APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
•	09/933,527	08/20/2001	Robert V. Norby	1095-1068.1	5832	
	TITLE OF INVENTION: R	AIL WELDERHEAD SHEA	AR APPARATUS			

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CFR 1.363). Change of cerrespon Address form PTO/SB/1 "Fee Address" indica PTO/SB/47; Rev 03-02 Number is required. 3. ASSIGNEE NAME ANI PLEASE NOTE: Unless recordation as set forth i (A) NAME OF ASSIGN	ation (or "Fee Address" Indiction (or more recent) attached. Use DRESIDENCE DATA TO Be an assignee is identified be n 37 CFR 3.11. Completion	Correspondence ation form e of a Customer E PRINTED ON Telow, no assignee of this form is NO	(1) the na or agents (2) the na registered 2 registered listed, no THE PATEN data will app T a substitute (3) RESIDENCE	nting on the patent front page, limes of up to 3 registered pater OR, alternatively, me of a single firm (having as attorney or agent) and the named patent attorneys or agents. If name will be printed. T (print or type) Dear on the patent. If an assign for filing an assignment. CE: (CITY and STATE OR CO	a member a 2 es of up to no name is 3 es is identified below, the current of the curr	ES B THORNBURG
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